EMPLOYEE RESPONSIBILITIES

$\underline{\underline{A}}$ WORKERS' COMPENSATION CHECKLIST

sends you to.

<u>Y 01</u>	ur Responsibilities:		
	Promptly notify your supervisor or management about a work-related injury or illness.		
	⇒ Tell your supervisor everything about the injury or illness - what, where, when and how it happened.		
	⇒ Seek medical attention as necessary.		
	Read the CA-11, When Injured at Work Information Guide for Federal Employees, which can be found at the following website: http://www.dol.gov/esa/regs/compliance/owcp/ca-11.htm		
	Complete the appropriate claim form (CA-1, CA-2) and submit it to your supervisor.		
	 ⇒ Obtain claim forms from the workers compensation specialist in your HR office. o Office of Workers' Compensation Programs (OWCP) Forms may also be obtained at the following website: http://www.dol.gov/esa/regs/compliance/owcp/forms.htm 		
	⇒ CA-1, Federal Employee's Notice of Traumatic Injury and Claim for Continuation of Pay/Compensation, for a wound or other condition of the body caused by external force, including stress or strain.		
	 Submit the CA-1 to your supervisor within 30 calendar days. Your entitlement to continuation of pay (COP) may be terminated if you fail to submit medical documentation within ten (10) workdays from the date of your injury. COP will be continued for up to 45 days contingent upon the submission of supporting CA-1, Federal Employee's Notice of Traumatic Injury and Claim for Continuation of Pay/Compensation, for a wound or other condition of the body caused by external force, including stress or strain.medical documentation. 		
	⇒ CA-2, Notice of Occupational Disease and Claim for Compensation, for a condition produced by the work environment over a period of time longer than one work day or shift.		
	 Submit the CA-2 to your supervisor no later than three years after you become aware that you suffered a work-related illness. Occupational disease claims are not eligible for continuation of pay. 		
	⇒ DOL Forms may also be obtained at the following website, or from your Human Resource workers compensation specialist: http://www.dol.gov/esa/regs/compliance/owcp/forms.htm		
	Let your supervisor know when you can be expected to return to work if the injury has caused you to miss work.		
	Keep in touch. Contact your supervisor if there is any change in the status of your recovery.		
	See your doctor. Continue the medical treatments prescribed by your doctor and see him/her as often as your condition requires.		
	⇒ Take your medication, continue your therapy, and attend any rehabilitation programs your doctor		

	Return to work as soon as medically possible.		
	\Rightarrow	Have your doctor provide medical reports periodically to your supervisor and to OWCP. Contact the workers compensation specialist in your HR office for the address.	
		O Your doctor can complete the CA-20, Attending Physician's Report, which can be obtained at the following website: http://www.dol.gov/esa/regs/compliance/owcp/forms.htm	
	If you expect to <u>remain out of work</u> for more than 45 days, inform your supervisor and complete the employee section of the CA-7, Claim for Compensation. Have your doctor complete the CA-20, Physician's Report.		
	合合合	Contact the workers compensation specialist in your HR office to discuss completion of the CA-7. Return the CA-7 to your supervisor. CA-20, Physician's Report Complete the first three sections (name, date of injury, and OWCP file number) and have the physician complete the remaining section. Have physician submit the form to OWCP and fax/mail a copy to the workers compensation specialist in your HR office.	
☐ If restricted or temporary work is available which is within your ability to perform while recovering, you must accept the work and return to duty.		estricted or temporary work is available which is within your ability to perform while you are overing, you must accept the work and return to duty.	
	⇨	The restricted or temporary work will be clearly defined so that you can take a written description to your doctor for his/her approval.	